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**** CONTINUING DATA *******

This application is a 371 of PCT/US99/30619 12/23/1999
 which is a CIP of 09/347,185 07/02/1999 PAT 6,371,904
 which is a CIP of 09/285,329 04/02/1999 PAT 6,356,782
 which is a CIP of 09/220,618 12/24/1998 ABN

**** FOREIGN APPLICATIONS *******

**** SMALL ENTITY ****

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 35	TOTAL CLAIMS 81	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS
34263

TITLE
Device and method for safe location and marking of a biopsy cavity

FILING FEE RECEIVED 1164	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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